



MECKLENBURG COUNTY

Area Mental Health, Developmental Disabilities and Substance Abuse Authority

429 Billingsley Rd., 2nd Floor
Charlotte, NC 28211-1098

HB 1473 Reduction in State Psychiatric Hospital Utilization Pilot Project Mecklenburg County Proposal

Current Crisis Continuum includes:

Crisis Service	FY 2007 Volume	Provider
24/7/365 MeckLINK Access Line	11,410 calls	Mecklenburg LME
Mobile Crisis	290 assessments	CriSyS-Affiliated Sante Group
Dedicated psychiatric Emergency Room and Urgent Care	16,074 visits	CMC-Randolph
44 Adult Inpatient beds	98% occupancy; 1,865 admissions	CMC-Randolph
22 Child and Adolescent Inpatient beds	85% occupancy; 630 admissions	CMC-Randolph
23 Hour Observation	1,420 admissions	CMC-Randolph
12 bed Crisis Stabilization Unit	361 admissions	CMC-Randolph
Social Setting Detoxification	3,416 admissions	Mecklenburg Provided Services
Broughton Liaison position	Involved with 426 discharges	Mecklenburg LME
Crisis Respite/Adolescents	Began April 2007 with 2 beds; Served 7 consumers in 2007; current capacity of 4 beds	Alexander Youth Network
Crisis Respite/Developmental Disabilities	2007 -served 6 consumers; YTD 2008 served 6 consumers	Developmental Disabilities Resources, Inc.
Intensive Care Management Program for all readmissions to inpatient within 30 days, consumers with co-occurring disorders and children under 12 admitted to inpatient	45 consumers currently served	Mecklenburg LME
Transitional Living and Drop-In Center for discharged Broughton consumers; Peer operated Warm Line	Opened July 2007; Served 16 consumers in transitional living and 73 in Peer Support Activities to include Warm Line Calls	Mecklenburg Open Door

Mecklenburg Broughton Statistical Information for 2006/2007

Level of Admission	Cumulative Days Utilized	Cumulative Allocation	06/07 Variance	2008 Allocation
Level A – Adult Admissions	5,685	5064	621	6,802
Level B-Adult Long-term	6,207	6,876	(669)	8,414
Level C-Adolescent	1616	564	1052	1,796
Level D – Geriatric and Long Term	1063	1068	(5)	1,161

Challenges:

- Continued population growth (Source: Charlotte Chamber of Commerce):
 - 2007 – 871,432
 - 2006 – 850,178
 - 2005 – 829,978
 - 2004 – 801,137
- Loss of over 200 local psychiatric beds since 2000
- CMC-Randolph and Presbyterian psychiatric units operate at capacity
- Regional draw of psychiatric emergency room services and over abundance of group homes attracts out of county residents
- Lack of in-state Psychiatric Residential Treatment Facility beds for children/adolescents increases length of stay at local hospitals.

Proposed Plan:

- Focus on creating additional capacity at CMC-Randolph utilizing newly created community resources to expedite discharges.
- Add second Broughton Liaison position (Masters level licensed clinician) to focus on timely discharges
- Partner with Julian Keith Center to utilize acute beds for Substance Abuse consumers with co-occurring psychiatric disorders
- Increase the number of Peer Support Specialists by six with Mecklenburg Open Door to provide support to consumers discharged from Broughton
- Add capacity at Mecklenburg Open Door Transitional Living program effective January 1, 2008. Increase capacity from 12 to 19 in Phase I and 19 in Phase II. The focus will be expanded from Broughton discharges to include consumers at CMC-Randolph who are medically stable but in need of housing and support. Mecklenburg Open Door to collaborate with a local substance abuse provider who will provide a Substance Abuse Comprehensive Outpatient Treatment program on site.
- Reassign a current LME employee to work as a “liaison” with CMC-Randolph to facilitate assessments and referrals into the Mecklenburg Open Door programs as well as other resources within the community.
- Fund a position at CMC-Randolph to engage consumers who have a high likelihood of relapse and require enhanced benefit services.

Goal/Funding Requested:

- Reduce bed day utilization by 350 bed days in 2008 and by 700 bed days in 2009
- Request \$204,820 in 2008 and \$405,240 in 2009